Under the Paperwork Reduction Act of 1995  TRANSMITTAL  FORM  (to be used for all correspondence after initial form)  Total Number of Pages in This Submission	Application Num Filing Date First Named Invo	April 9, Pentor David N 3751 Peter T	
	ENCLOSURES (	Charle all that	
Fee Transmittal Form Fee Attached  Amendment/Reply After Final Affidavits/declaration(s)  Extension of Time Request Express Abandonment Request Information Disclosure Statement	Drawing(s)  Licensing-related F  Petition  Petition to Convert Provisional Applica Power of Attorney, Change of Corresp  Terminal Disclaime  Request for Refunct  CD, Number of CD  Landscape T	to a tion Revocation ondence Address or	After Allowance Communication to TC  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please Identify below):  Return Receipt Postcard
Firm Name Warn, Hoffmann, Mill	FURE OF APPLICANTER & LaLone, P.C.	Γ, ATTORNEY, C	DR AGENT
Signature Printed name			

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Reg. No.

32775

Philip R. Warn

November 2, 2005

Date

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PTO/SB/17 (12-04v2)

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ees pursuant to the Consolidate Propriations Act, 2005 (H.R. 4818)						
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FEE IRANSIVIII
For FY 2005

Applicant claims small entity status.	See 37 CFR 1.27

Complete ii known				
Application Number	10/821,740			
Filing Date	April 9, 2004			
First Named Inventor	David Mills			
Examiner Name	ON/OFF SOLENOID	_		
Art Unit	3751			
Attorney Docket No.	DKT 03050A (BWI-00086)			

TOTAL AMOUNT OF PAYM	IENT (\$	) 130.00		Attorney Docket	No. DK7	03050A (BV	VI-00086)
METHOD OF PAYMENT	METHOD OF PAYMENT (check all that apply)						
Check Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account Number: 501612  Deposit Account Name: Warn, Hoffmann, Miller & LaLone, P.C.  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee							
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under 37 CFR WARNING: Information on this information and authorization o	form may b	ecome public. Credit	card info				rovide credit card
FEE CALCULATION							
BASIC FILING, SEARCH, AND EXAMINATION FEES     FILING FEES SEARCH FEES EXAMINATION FEES     Small Entity Small Entity Small Entity							
Application Type	Fee (\$)	Fee (\$)	Fee (\$	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims  Small Entity Fee (\$) Fee (\$) 25 25 100 180							
	Extra Clai	ms Fee (\$)	<u>Fee</u>	Paid (\$)		Multiple De	ependent Claims
20 or HP = _ HP = highest number of total of	claims paid f Extra Clai	ms <u>Fee (\$)</u> x	. =	Paid (\$)		<u>Fee (\$)</u>	Fee Paid (\$)
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)				Fees Paid (\$)  130,00			

SUBMITTED BY	000		
Signature	Thur	Registration No: (Attorney/Agent) 32775	Telephone (248) 364-4300
Name (Print/Type)	Philip R. Warn		Date Thoresale 2,7 61

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